### AAND DELIVERED



2016 AUG -3 AH 11: 60

Committee Name:		
fix America First		
If registered, FEC ID:		***************************************
Today's Date:		
08/01/2016		
	<del></del>	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Robin Painter

, Treasurer

# 

#### ANNO DELIVERED

**FEC** 

## STATEMENT OF

FEG MAIL CENTER

FORM 1	ORGANIZATION	2016 AUG -3 AM 9: 16 Office Use Only
NAME OF COMMITTEE (in	full) (Check if name Example:If typing, type over the lines.	
FIX AME	RICA FIRST	
ADDRESS (number an	d street) [[1]55, F, S,T, N,W	
☐ ◀ (Check if a is changed)	ddress [5,U,T,T,E,1,0,5,9,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	
	CITY A	
COMMITTEE'S E-MA	IL ADDRESS	
☐ ◀ (Check if a is changed)	Optional Second E-Mail Address	<u>M </u>
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
【 【 (Check if a is changed)	ddress www.FAFPACCOM	
2. DATE O.	2.7 2016	
3. FEC IDENTIFIC	ATION NUMBER ► C	
4. IS THIS STATEM	ENT NEW (N) OR AMENDED (A	·. ) 
I certify that I have ex	xamined this Statement and to the best of my knowledge and believe	ef it is true, correct and complete.
Type or Print Name o	Treasurer ROBIN PAINTER	·
Signature of Treasurer	Kolin Painter	Date 0.8 0.1 20.16
NOTE: Submission of fa	alse, erroneous, or incomplete information may subject the person signi ANY CHANGE IN INFORMATION SHOULD BE REPORTE	
Office Use	For further information Federal Election Community Toll Free 800-424-953(	mission FEC FURINI I

	FEC Fo	orm 1 (Revised 02/2009)	Page 2			
		COMMITTEE  e Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate			
Nam Cand	e of didate	<u> </u>				
	didate Affiliat	ion Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of lidate					
Par	ty Cor	nmittee:				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	Action Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is				
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join	t Fund	draising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political			
	Com	nmittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number	~ · · · · · · · · · · · · · · · · · · ·			
	4.	FEC ID number				

FEC Form 1 (Revised 0	2/2009)	Page <b>3</b>
Write or Type Committee Name		
FTX AMERI	CA FIRST	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representati	ve, or Leadership PAC Sponsor
MONELLI		
	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>                                     </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
		<b></b>
Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the	e person in possession of committee
Full Name [R <sub>I</sub> O <sub>I</sub> B <sub>I</sub> T	N PAINTER	
Mailing Address	11.155 F ST NW	
	SUITE 1050	
	WASHINGTON DC	2,0,0,0,4
Title or Position	CITY STATE	ZIP CODE
TREASIURER	Telephone number	
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committed sistant treasurer).	ee; and the name and address of
Full Name of Treasurer	N, PAINTER	
Mailing Address	1.1.5.5 F. S.T. N.W.	
	SUJTE, 10,50	
	WASHINGTON	[2,0,0,0,4]-
Title or Position $[T_1R_1 \in P_1 \setminus S_1 \cup _1 R_1 \in _1 R_1]$	CITY STATE  Telephone number	ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)

Full Name of

# **Hand Delivered**

## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

	Date of Receipt
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PREPARER (3/2015)	DATE PREPARED